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Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>IND 005 462 601</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(219) 399-2492</b>	4. Manifest Tracking Number <b>020191499 JJK</b>			
5. Generator's Name and Mailing Address <b>ARCELORMITTAL USA LLC</b>					Generator's Site Address (if different than mailing address)			
3001 DICKEY ROAD <b>EAST CHICAGO, IN 46312</b>								
Generator's Phone: <b>(219) 399-3189</b>								
6. Transporter 1 Company Name <b>ENVIRITE OF ILLINOIS, INC.</b>					U.S. EPA ID Number <b>ILD 000 666 206</b>			
7. Transporter 2 Company Name					U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>ENVIRITE OF ILLINOIS, INC.-USE</b>					U.S. EPA ID Number <b>ILD 000 666 206</b>			
16435 S. CENTER AVE. <b>HARVEY, IL 60426</b>								
Facility's Phone: <b>(708) 596-7040</b>								
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	<b>X</b>	<b>RQ, NA3077, Hazardous waste, solid, n.o.s. (Chromium), 9, PGIII, (F006), ERG #171</b>	<b>001</b>	<b>DT</b>	<b>15</b>	<b>T</b>	<b>F006 D007</b>	
14. Special Handling Instructions and Additional Information <b>10331 / CENTRAL TREATMENT PLANT SLUDGE / Emergency Contact: Kevin Martin w/Naico (219)242-9834</b>								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offoror's Printed/Typed Name <b>ANNETTE PRICE</b>					Signature <i>Annette Price</i>		Month Day Year <b>7 9 19</b>	
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
	Transporter signature (for exports only): _____							
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials							
	Transporter 1 Printed/Typed Name <b>Laurence Venditti</b>					Signature <i>Laurence Venditti</i>		Month Day Year <b>07 09 19</b>
	Transporter 2 Printed/Typed Name					Signature		Month Day Year
DESIGNATED FACILITY	18. Discrepancy							
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
	Manifest Reference Number:							
	18b. Alternate Facility (or Generator) U.S. EPA ID Number							
	Facility's Phone:							
	18c. Signature of Alternate Facility (or Generator)						Month Day Year	
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
	1. <b>H110</b>		2.		3.		4.	
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
	Printed/Typed Name <i>Shawn Price</i>					Signature <i>Shawn Price</i>		Month Day Year <b>07 09 19</b>

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>IND 005 462 601</b>		2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(219) 399-2492</b>		4. Manifest Tracking Number <b>020191500 JJK</b>		
5. Generator's Name and Mailing Address <b>ARCELORMITTAL USA LLC</b> <b>3001 DICKEY ROAD</b> <b>EAST CHICAGO, IN 46312</b> Generator's Phone: <b>(219) 399-3189</b>									
6. Transporter 1 Company Name <b>ENVIRITE OF ILLINOIS, INC.</b>						U.S. EPA ID Number <b>ILD 000 666 206</b>			
7. Transporter 2 Company Name						U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>ENVIRITE OF ILLINOIS, INC.-USE</b> <b>16435 S. CENTER AVE.</b> <b>HARVEY, IL 60426</b> Facility's Phone: <b>(708) 596-7040</b>						U.S. EPA ID Number <b>ILD 000 666 206</b>			
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	X	RQ, NA3077, Hazardous waste, solid, n.o.s. (Chromium), 9, PGIII, (F006), ERG #171			No. 1 Type DT		15	T	F006 D007
	2.								
	3.								
	4.								
14. Special Handling Instructions and Additional Information <b>10331 / CENTRAL TREATMENT PLANT SLUDGE / Emergency Contact: Kevin Martin w/Naico (219)242-9834</b> <b>CANT BEELD</b>									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Offor's Printed/Typed Name <b>ENRIQUE FERNANDEZ</b> Signature _____ Month Day Year <b>17 17 19</b>									
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____								
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name <b>William Houbickian</b> Signature _____ Month Day Year <b>02 12 19</b> Transporter 2 Printed/Typed Name _____ Signature _____ Month Day Year _____								
DESIGNATED FACILITY	18. Discrepancy								
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
	18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number _____								
	Facility's Phone: _____ 18c. Signature of Alternate Facility (or Generator) _____ Month Day Year _____								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1. <b>H110</b>		2. _____		3. _____		4. _____			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a									
Printed/Typed Name <b>LEONARD E STONY</b>				Signature _____				Month Day Year <b>07 12 19</b>	

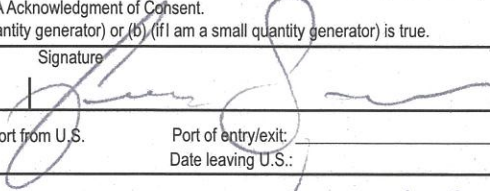
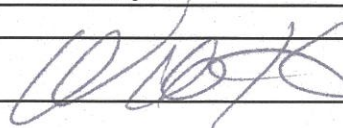
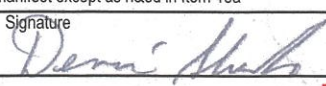
Please print or type.

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>IND 005 462 601</b>		2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(219) 399-2492</b>		4. Manifest Tracking Number <b>020192001 JJK</b>					
5. Generator's Name and Mailing Address <b>ARCELORMITTAL USA LLC 3001 DICKEY ROAD EAST CHICAGO, IN 46312</b>					Generator's Site Address (if different than mailing address)							
Generator's Phone: <b>(219) 399-3189</b>												
6. Transporter 1 Company Name <b>ENVIRITE OF ILLINOIS, INC.</b>					U.S. EPA ID Number <b>ILD 000 666 206</b>							
7. Transporter 2 Company Name					U.S. EPA ID Number							
8. Designated Facility Name and Site Address <b>ENVIRITE OF ILLINOIS, INC.-USE 16435 S. CENTER AVE. HARVEY, IL 60426</b>					U.S. EPA ID Number <b>ILD 000 666 206</b>							
Facility's Phone: <b>(708) 596-7040</b>												
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes			
					No.	Type						
	X	RQ, NA3077, Hazardous waste, solid, n.o.s., (Chromium), 9, PGIII, (F006), ERG #171			1	DT	15	T	F006	D007		
14. Special Handling Instructions and Additional Information <b>10331 / CENTRAL TREATMENT PLANT SLUDGE / Emergency Contact: Kevin Martin w/Naico (219)242-9834</b>												
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.												
Generator's/Offor's Printed/Typed Name <b>ENRIQUE FERNANDEZ</b>					Signature <i>[Signature]</i>		Month <b>7</b>		Day <b>30</b>		Year <b>19</b>	
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____											
	Transporter signature (for exports only): _____											
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials											
	Transporter 1 Printed/Typed Name <b>William Howorka</b>					Signature <i>[Signature]</i>		Month <b>07</b>		Day <b>30</b>		Year <b>19</b>
	Transporter 2 Printed/Typed Name					Signature		Month		Day		Year
DESIGNATED FACILITY	18. Discrepancy											
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection											
	18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number _____											
	Facility's Phone: _____											
	18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____											
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
	1. <b>H110</b>			2.			3.			4.		
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a											
	Printed/Typed Name <b>Shawn P. [Signature]</b>					Signature <i>[Signature]</i>		Month <b>07</b>		Day <b>30</b>		Year <b>19</b>

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number IND 005 462 601	2. Page 1 of 1	3. Emergency Response Phone (219) 399-2492	4. Manifest Tracking Number <b>020192002 JJK</b>		
5. Generator's Name and Mailing Address ARCELORMITTAL USA LLC 3001 DICKEY ROAD EAST CHICAGO, IN 46312 Generator's Phone: (219) 399-3189					Generator's Site Address (if different than mailing address)		
6. Transporter 1 Company Name ENVIRITE OF ILLINOIS, INC.					U.S. EPA ID Number ILD 000 666 206		
7. Transporter 2 Company Name					U.S. EPA ID Number		
8. Designated Facility Name and Site Address ENVIRITE OF ILLINOIS, INC.-USE 16435 S. CENTER AVE. HARVEY, IL 60426 Facility's Phone: (708) 596-7040					U.S. EPA ID Number ILD 000 666 206		
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
		No.	Type				
X	RQ, NA3077, Hazardous waste, solid, n.o.s. ,(Chromium), 9, PGIII, (F006), ERG #171	1	DT	15	T	F006	D007
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information 10331 / CENTRAL TREATMENT PLANT SLUDGE / Emergency Contact: Kevin Martin w/Naico (219)242-9834							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name ENRIQUE FERNANDEZ		Signature 			Month Day Year 8/15/19		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name William Hovorka		Signature 			Month Day Year 8/15/19		
Transporter 2 Printed/Typed Name		Signature			Month Day Year		
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H110		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name Dennis Glowacki		Signature 			Month Day Year 8/15/19		

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>IND 005 462 601</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(219) 399-2492</b>	4. Manifest Tracking Number <b>021079645 JJK</b>	
5. Generator's Name and Mailing Address <b>ARCELORMITTAL USA LLC</b> <b>3001 DICKEY ROAD</b> <b>EAST CHICAGO, IN 46312</b> Generator's Phone: <b>(219) 399-3189</b>						
6. Transporter 1 Company Name <b>ENVIRITE OF ILLINOIS, INC.</b> U.S. EPA ID Number <b>ILD 000 666 206</b>						
7. Transporter 2 Company Name U.S. EPA ID Number						
8. Designated Facility Name and Site Address <b>ENVIRITE OF ILLINOIS, INC.-USE</b> <b>16435 S. CENTER AVE.</b> <b>HARVEY, IL 60426</b> Facility's Phone: <b>(708) 596-7040</b> U.S. EPA ID Number <b>ILD 000 666 206</b>						
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity
				No.	Type	
	X	1RQ, NA3077, Hazardous waste, solid, n.o.s. (Chromium), 9, PGIII, (F006), ERG #171		1	DT	15
	2.					
	3.					
	4.					
14. Special Handling Instructions and Additional Information <b>10331 / CENTRAL TREATMENT PLANT SLUDGE / Emergency Contact: Kevin Martin w/Nalco (219)242-9834</b>						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name <b>ANNETTE PRICE</b>		Signature <i>Annette Price</i>		Month Day Year <b>8 22 19</b>		
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input checked="" type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:			
	Transporter signature (for exports only):					
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials					
	Transporter 1 Printed/Typed Name <b>William Hawick</b>		Signature <i>William Hawick</i>		Month Day Year <b>8 22 19</b>	
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name		Signature		Month Day Year	
	18. Discrepancy					
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					
	18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number					
	Facility's Phone: 18c. Signature of Alternate Facility (or Generator) Month Day Year					
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. <b>H110</b>		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name <b>Leonard Kiley</b>		Signature <i>Leonard Kiley</i>		Month Day Year <b>8 22 19</b>		

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>IND 005 462 601</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(219) 399-2492</b>	4. Manifest Tracking Number <b>020192004 JJK</b>			
5. Generator's Name and Mailing Address <b>ARCELORMITTAL USA LLC 3001 DICKEY ROAD EAST CHICAGO, IN 46312</b>					Generator's Site Address (if different than mailing address)			
Generator's Phone: <b>(219) 399-3189</b>					U.S. EPA ID Number <b>ILD 000 666 206</b>			
6. Transporter 1 Company Name <b>ENVIRITE OF ILLINOIS, INC.</b>					U.S. EPA ID Number			
7. Transporter 2 Company Name					U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>ENVIRITE OF ILLINOIS, INC.-USE 16435 S. CENTER AVE. HARVEY, IL 60426</b>					U.S. EPA ID Number <b>ILD 000 666 206</b>			
Facility's Phone: <b>(708) 596-7040</b>								
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	<b>X</b>	<b>RQ, NA3077, Hazardous waste, solid, n.o.s. (Chromium), 9, PGIII, (F006), ERG #171</b>	<b>001</b>	<b>DT</b>	<b>15</b>	<b>T</b>	<b>F006 D007</b>	
14. Special Handling Instructions and Additional Information <b>10331 / CENTRAL TREATMENT PLANT SLUDGE / Emergency Contact: Kevin Martin w/Nalco (219)242-9834</b>								
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Generator's/Offor's Printed/Typed Name <b>ANNETTE PRICE</b>					Signature <i>Annette Price</i>		Month Day Year <b>9 6 19</b>	
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
	Transporter signature (for exports only): _____							
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials							
	Transporter 1 Printed/Typed Name <b>Laurence Vendith</b>					Signature <i>Laurence Vendith</i>		Month Day Year <b>09 06 19</b>
	Transporter 2 Printed/Typed Name					Signature		Month Day Year
DESIGNATED FACILITY	18. Discrepancy							
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
	Manifest Reference Number: _____							
	18b. Alternate Facility (or Generator) U.S. EPA ID Number							
	Facility's Phone: _____							
	18c. Signature of Alternate Facility (or Generator) Month Day Year							
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
	1. <b>H110</b>	2.	3.	4.				
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
	Printed/Typed Name <b>CHRISTOPHER STONY</b>					Signature <i>Christopher Stony</i>		Month Day Year <b>09 06 19</b>

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number IND 005 462 601	2. Page 1 of 1	3. Emergency Response Phone (219) 399-2492	4. Manifest Tracking Number <b>020192003 JJK</b>					
5. Generator's Name and Mailing Address <b>ARCELORMITTAL USA LLC</b> <b>3001 DICKEY ROAD</b> <b>EAST CHICAGO, IN 46312</b> Generator's Phone: <b>(219) 399-3189</b>							Generator's Site Address (if different than mailing address)			
6. Transporter 1 Company Name <b>ENVIRITE OF ILLINOIS, INC.</b>							U.S. EPA ID Number <b>ILD 000 666 206</b>			
7. Transporter 2 Company Name							U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>ENVIRITE OF ILLINOIS, INC.-USE</b> <b>16435 S. CENTER AVE.</b> <b>HARVEY, IL 60426</b> Facility's Phone: <b>(708) 596-7040</b>							U.S. EPA ID Number <b>ILD 000 666 206</b>			
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) <b>X RQ, NA3077, Hazardous waste, solid, n.o.s., (Chromium), 9, PGIII, (F006), ERG #171</b>			10. Containers		11. Total Quantity <b>15</b>	12. Unit Wt./Vol. <b>T</b>	13. Waste Codes <b>F006 D007</b>		
				No.	Type					
				<b>1</b>	<b>DT</b>					
14. Special Handling Instructions and Additional Information <b>10331 / CENTRAL TREATMENT PLANT SLUDGE / Emergency Contact: Kevin Martin w/Nalco (219) 242-9834</b>										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Offor's Printed/Typed Name <b>Carl Geib</b>			Signature <b>Carl Geib</b>			Month Day Year <b>08/30/19</b>				
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____										
17. Transporter Acknowledgment of Receipt of Materials										
Transporter 1 Printed/Typed Name <b>William Horvath</b>			Signature <b>[Signature]</b>			Month Day Year <b>08/30/19</b>				
Transporter 2 Printed/Typed Name			Signature			Month Day Year				
18. Discrepancy										
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection										
18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number: _____										
Facility's Phone: _____										
18c. Signature of Alternate Facility (or Generator) _____ Month Day Year _____										
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
1. <b>H110</b>		2.		3.		4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a										
Printed/Typed Name <b>RONALD R STON</b>			Signature <b>[Signature]</b>			Month Day Year <b>08/30/19</b>				

Please print or type.

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>IND 005 462 601</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(219) 399-2492</b>	4. Manifest Tracking Number <b>020192005 JJK</b>			
5. Generator's Name and Mailing Address <b>ARCELORMITTAL USA LLC 3001 DICKEY ROAD EAST CHICAGO, IN 46312</b>					Generator's Site Address (if different than mailing address)			
Generator's Phone: <b>(219) 399-3189</b>								
6. Transporter 1 Company Name <b>ENVIRITE OF ILLINOIS, INC.</b>					U.S. EPA ID Number <b>ILD 000 666 206</b>			
7. Transporter 2 Company Name					U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>ENVIRITE OF ILLINOIS, INC.-USE 16435 S. CENTER AVE. HARVEY, IL 60426</b>					U.S. EPA ID Number <b>ILD 000 666 206</b>			
Facility's Phone: <b>(708) 596-7040</b>								
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
		No.	Type					
X	RQ, NA3077, Hazardous waste, solid, n.o.s., (Chromium), 9, PGIII, (F006), ERG #171	1	DT	15	T	F006	D007	
14. Special Handling Instructions and Additional Information <b>10331 / CENTRAL TREATMENT PLANT SLUDGE / Emergency Contact: Kevin Martin w/Naico (219)242-9834</b>								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offoror's Printed/Typed Name <b>ANNETTE PRICE</b>					Signature <i>Annette Price</i>		Month Day Year <b>19 12 19</b>	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____								
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name <b>William Howard</b>					Signature <i>William Howard</i>		Month Day Year <b>09 12 19</b>	
Transporter 2 Printed/Typed Name					Signature		Month Day Year	
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number: _____								
Facility's Phone: _____								
18c. Signature of Alternate Facility (or Generator) _____ Month Day Year								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. <b>H110</b>		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 19a								
Printed/Typed Name <b>Steven Price</b>					Signature <i>Steven Price</i>		Month Day Year <b>09 12 19</b>	

Please print or type.

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>IND 005 462 601</b>		2. Page 1 of <b>1</b>		3. Emergency Response Phone <b>(219) 399-2492</b>		4. Manifest Tracking Number <b>020192006 JJK</b>							
5. Generator's Name and Mailing Address <b>ARCELORMITTAL USA, LLC 3001 DICKEY ROAD EAST CHICAGO, IN 46312</b>						Generator's Site Address (if different than mailing address)									
Generator's Phone: <b>(219) 399-3189</b>															
6. Transporter 1 Company Name <b>ENVIRITE OF ILLINOIS, INC.</b>						U.S. EPA ID Number <b>ILD 000 666 206</b>									
7. Transporter 2 Company Name						U.S. EPA ID Number									
8. Designated Facility Name and Site Address <b>ENVIRITE OF ILLINOIS, INC.-USE 16435 S. CENTER AVE. HARVEY, IL 60426</b>						U.S. EPA ID Number <b>ILD 000 666 206</b>									
Facility's Phone: <b>(708) 596-7040</b>															
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes					
	<b>X</b>	<b>RQ, NA3077, Hazardous waste, solid, n.o.s. (Chromium), 9, PGIII, (F006), ERG #171</b>				<b>1</b>	<b>DT</b>	<b>15</b>	<b>T</b>	<b>F006</b>	<b>D007</b>				
14. Special Handling Instructions and Additional Information <b>10331 / CENTRAL TREATMENT PLANT SLUDGE / Emergency Contact: Kevin Martin w/Naico (219)242-9834</b>															
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.															
Generator's/Offor's Printed/Typed Name <b>Carl Geib</b>						Signature <i>Carl Geib</i>			Month Day Year <b>9   19   19</b>						
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. <b>02</b> Port of entry/exit: <b>06511</b> Date leaving U.S.:														
	Transporter signature (for exports only):														
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials														
	Transporter 1 Printed/Typed Name <b>Laurence Venditti</b>						Signature <i>Laurence Venditti</i>			Month Day Year <b>09   19   19</b>					
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name						Signature			Month Day Year					
DESIGNATED FACILITY	18. Discrepancy														
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection														
	Manifest Reference Number:														
	18b. Alternate Facility (or Generator) U.S. EPA ID Number														
	Facility's Phone:														
DESIGNATED FACILITY	18c. Signature of Alternate Facility (or Generator)														
	Month Day Year														
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)															
1. <b>H110</b>				2.				3.				4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a															
Printed/Typed Name <b>Leonard E. Ryan</b>						Signature <i>Leonard E. Ryan</i>			Month Day Year <b>09   19   19</b>						

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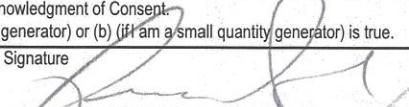
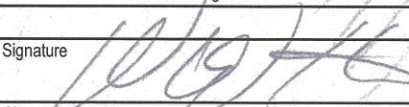
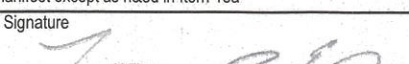
Please print or type.

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>IND 005 462 601</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(219) 399-2492</b>	4. Manifest Tracking Number <b>020192007 JJK</b>		
5. Generator's Name and Mailing Address <b>ARCELORMITTAL USA LLC 3001 DICKEY ROAD EAST CHICAGO, IN 46312</b>					Generator's Site Address (if different than mailing address)		
Generator's Phone: <b>(219) 399-3189</b>							
6. Transporter 1 Company Name <b>ENVIRITE OF ILLINOIS, INC.</b>					U.S. EPA ID Number <b>ILD 000 666 206</b>		
7. Transporter 2 Company Name					U.S. EPA ID Number		
8. Designated Facility Name and Site Address <b>ENVIRITE OF ILLINOIS, INC.-USE 16435 S. CENTER AVE. HARVEY, IL 60426</b>					U.S. EPA ID Number <b>ILD 000 666 206</b>		
Facility's Phone: <b>(708) 596-7040</b>							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
			No.	Type			
	<b>X</b>	<b>RQ, NA3077, Hazardous waste, solid, n.o.s. (Chromium), 9, PGIII, (F006), ERG #171</b>	<b>1</b>	<b>DT</b>	<b>15</b>	<b>T</b>	<b>F006 D007</b>
14. Special Handling Instructions and Additional Information <b>10331 / CENTRAL TREATMENT PLANT SLUDGE / Emergency Contact: Kevin Martin w/Naico (219)242-9834</b>							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name <b>ANNETTE PRICE</b>					Signature <i>Annette Price</i>		
					Month Day Year <b>12/26/19</b>		
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____						
	17. Transporter Acknowledgment of Receipt of Materials						
	Transporter 1 Printed/Typed Name <b>William Hovorka</b>					Signature <i>William Hovorka</i>	
	Transporter 2 Printed/Typed Name					Signature	
						Month Day Year <b>12/26/19</b>	
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number _____						
	Facility's Phone: _____						
	18c. Signature of Alternate Facility (or Generator) _____ Month Day Year _____						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. <b>H110</b>		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name <b>William Hovorka</b>					Signature <i>William Hovorka</i>		
					Month Day Year <b>12/26/19</b>		

Please print or type.

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>IND 005 462 601</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(219) 399-2492</b>	4. Manifest Tracking Number <b>020192008 JJK</b>			
5. Generator's Name and Mailing Address <b>ARCELORMITTAL USA LLC 3001 DICKEY ROAD EAST CHICAGO, IN 46312</b>					Generator's Site Address (if different than mailing address)			
Generator's Phone: <b>(219) 399-3189</b>								
6. Transporter 1 Company Name <b>ENVIRITE OF ILLINOIS, INC.</b>					U.S. EPA ID Number <b>ILD 000 666 206</b>			
7. Transporter 2 Company Name					U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>ENVIRITE OF ILLINOIS, INC.-USE 16435 S. CENTER AVE. HARVEY, IL 60426</b>					U.S. EPA ID Number <b>ILD 000 666 206</b>			
Facility's Phone: <b>(708) 596-7040</b>								
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	<b>X</b>	<b>RQ, NA3077, Hazardous waste, solid, n.o.s. (Chromium), 9, PGIII, (F006), ERG #171</b>	<b>1</b>	<b>DT</b>	<b>15</b>	<b>T</b>	<b>F006 D007</b>	
14. Special Handling Instructions and Additional Information <b>10331 / CENTRAL TREATMENT PLANT SLUDGE / Emergency Contact: Kevin Martin w/Nalco (219)242-9834</b>								
15. <b>GENERATOR'S/OFFEROR'S CERTIFICATION:</b> I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offor's Printed/Typed Name <b>KEVIN MARTIN</b>					Signature 		Month Day Year <b>10 3 19</b>	
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
	Transporter signature (for exports only): _____							
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials							
	Transporter 1-Printed/Typed Name <b>William Hovorka</b>					Signature 		Month Day Year <b>10 03 19</b>
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name					Signature		Month Day Year
	18. Discrepancy							
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
	Manifest Reference Number: _____							
	18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone: _____								
18c. Signature of Alternate Facility (or Generator)							Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. <b>H110</b>		2. _____		3. _____		4. _____		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name <b>LEONARD E STAY</b>					Signature 		Month Day Year <b>10 03 19</b>	

Form Approved. OMB No. 2050-0039

EPA Form 8700-22 (Rev. 12-17) Previous editions are obsolete.

DESIGNATED FACILITY TO GENERATOR

EPA Form 8700-22 (Rev. 12-17) Previous editions are obsolete.

DESIGNATED FACILITY TO GENERATOR

GENERATOR	UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 005 462 601		2. Page 1 of 1		3. Emergency Response Phone (219) 399-2492		4. Manifest Tracking Number 021081398 JJK						
	5. Generator's Name and Mailing Address ARCELORMITTAL USA LLC 3001 DICKEY ROAD EAST CHICAGO, IN 46312 Generator's Phone: (219) 399-3189								Generator's Site Address (if different than mailing address) 179289						
	6. Transporter 1 Company Name ENVIRITE OF ILLINOIS, INC.								U.S. EPA ID Number ILD 000 666 206						
	7. Transporter 2 Company Name								U.S. EPA ID Number						
	8. Designated Facility Name and Site Address ENVIRITE OF ILLINOIS, INC.-USE 16435 S. CENTER AVE. HARVEY, IL 60426 Facility's Phone: (708) 596-7040								U.S. EPA ID Number ILD 000 666 206						
TRANSPORTER INT'L	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes					
	X	RQ, NA3077, Hazardous waste, solid, n.o.s. (Chromium), 9, PGIII, (F006), ERG #171				001 DT		15	T	F006	D007				
	2.														
	3.														
	4.														
DESIGNATED FACILITY	14. Special Handling Instructions and Additional Information 10331 / CENTRAL TREATMENT PLANT SLUDGE / Emergency Contact: Kevin Martin w/Nalco (219)242-8834														
	15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.														
	Generator's/Offoror's Printed/Typed Name ENRIQUE FERRANDEZ								Signature		Month Day Year 10/24/19				
	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:														
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name RECH MYSIWE Signature Month Day Year 10/24/19 Transporter 2 Printed/Typed Name Signature Month Day Year														
DESIGNATED FACILITY	18. Discrepancy														
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection														
	18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number														
	Facility's Phone:														
	18c. Signature of Alternate Facility (or Generator) Month Day Year														
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)															
1. H110				2.				3.				4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a															
Printed/Typed Name Dennis Glowacki								Signature		Month Day Year 10/24/19					

Please print or type.

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>IND 005 462 601</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(219) 399-2492</b>	4. Manifest Tracking Number <b>020192011 JJK</b>			
5. Generator's Name and Mailing Address <b>ARCELORMITTAL USA LLC 3001 DICKEY ROAD EAST CHICAGO, IN 46312</b>					Generator's Site Address (if different than mailing address)			
Generator's Phone: <b>(219) 399-3189</b>								
6. Transporter 1 Company Name <b>ENVIRITE OF ILLINOIS, INC.</b>					U.S. EPA ID Number <b>ILD 000 666 206</b>			
7. Transporter 2 Company Name					U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>ENVIRITE OF ILLINOIS, INC.-USE 16435 S. CENTER AVE. HARVEY, IL 60426</b>					U.S. EPA ID Number <b>ILD 000 666 206</b>			
Facility's Phone: <b>(708) 596-7040</b>								
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
		No.	Type					
X	<b>RQ, NA3077, Hazardous waste, solid, n.o.s., (Chromium), 9, PGIII, (F006), ERG #171</b>	1	DT	15	T	F006	D007	
	2. <i>15 T</i>							
	3. <i>20</i>							
	4.							
14. Special Handling Instructions and Additional Information <b>10331 / CENTRAL TREATMENT PLANT SLUDGE / Emergency Contact: Kevin Martin w/Nalco (219)242-9834</b>								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offoror's Printed/Typed Name <b>ENRIQUE CORRAL DIAZ</b>				Signature <i>[Signature]</i>		Month Day Year <b>10/31/19</b>		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____								
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name <b>William Horvath</b>				Signature <i>[Signature]</i>		Month Day Year <b>10/31/19</b>		
Transporter 2 Printed/Typed Name				Signature		Month Day Year		
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
Manifest Reference Number: _____								
18b. Alternate Facility (or Generator) U.S. EPA ID Number								
Facility's Phone: _____								
18c. Signature of Alternate Facility (or Generator)						Month Day Year		
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. <b>H110</b>		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18g								
Printed/Typed Name <b>Dennis Glowacki</b>				Signature <i>[Signature]</i>		Month Day Year <b>10/31/19</b>		

Please print or type.

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number IND 005 462 601	2. Page 1 of 1	3. Emergency Response Phone (219) 399-2492	4. Manifest Tracking Number <b>020192012 JJK</b>					
5. Generator's Name and Mailing Address ARCELORMITTAL USA LLC 3001 DICKEY ROAD EAST CHICAGO, IN 46312 Generator's Phone: (219) 399-3189					Generator's Site Address (if different than mailing address)					
6. Transporter 1 Company Name ENVIRITE OF ILLINOIS, INC.					U.S. EPA ID Number ILD 000 666 206					
7. Transporter 2 Company Name					U.S. EPA ID Number					
8. Designated Facility Name and Site Address ENVIRITE OF ILLINOIS, INC.-USE 16435 S. CENTER AVE. HARVEY, IL 60426 Facility's Phone: (708) 596-7040					U.S. EPA ID Number ILD 000 666 206					
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes		
	X	RQ, NA3077, Hazardous waste, solid, n.o.s., (Chromium), 9, PGIII, (F006), ERG #171		No.	Type	15	T	F006	D007	
	2.									
	3.									
	4.									
14. Special Handling Instructions and Additional Information 10331 / CENTRAL TREATMENT PLANT SLUDGE / Emergency Contact: Kevin Martin w/Nalco (219)242-9834 <div style="text-align: right;">Trailer # 222</div>										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Offeror's Printed/Typed Name <i>Tim Susoreny</i> Signature <i>Tim Susoreny</i> Month Day Year <i>11 7 19</i>										
TRANSPORTER INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:									
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name <i>Laurence Venditti</i> Signature <i>Laurence Venditti</i> Month Day Year <i>11 07 19</i> Transporter 2 Printed/Typed Name Signature Month Day Year									
DESIGNATED FACILITY	18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: U.S. EPA ID Number 18b. Alternate Facility (or Generator) Facility's Phone: 18c. Signature of Alternate Facility (or Generator) Month Day Year									
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H110 2. 3. 4.									
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name <i>Dennis Glowacki</i> Signature <i>Dennis Glowacki</i> Month Day Year <i>11 7 19</i>									

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>IND 005 462 601</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(219) 399-2492</b>	4. Manifest Tracking Number <b>021082136 JJK</b>		
5. Generator's Name and Mailing Address <b>ARCELORMITTAL USA LLC 3001 DICKEY ROAD EAST CHICAGO, IN 46312</b>			Generator's Site Address (if different than mailing address)				
Generator's Phone: <b>(219) 399-3189</b>							
6. Transporter 1 Company Name <b>ENVIRITE OF ILLINOIS, INC.</b>			U.S. EPA ID Number <b>ILD 000 666 206</b>				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address <b>ENVIRITE OF ILLINOIS, INC.-USE 16435 S. CENTER AVE. HARVEY, IL 60426</b>			U.S. EPA ID Number <b>ILD 000 666 206</b>				
Facility's Phone: <b>(708) 596-7040</b>							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	X	1RQ, NA3077, Hazardous waste, solid, n.o.s. (Chromium), 9, PGIII, (F006), ERG #171	001 DT		15	T	F006 D007
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information <b>10331 / CENTRAL TREATMENT PLANT SLUDGE / Emergency Contact: Kevin Martin w/Nalco (219) 242-9834</b>  <b>Dump 2-260</b>							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offeror's Printed/Typed Name <b>ANNETTE PRICE</b>		Signature <i>Annette Price</i>		Month Day Year <b>11 14 19</b>			
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
	17. Transporter Acknowledgment of Receipt of Materials						
TRANSPORTER	Transporter 1 Printed/Typed Name <b>Adam Stonebraker</b>		Signature <i>Adam Stonebraker</i>		Month Day Year <b>11 14 19</b>		
	Transporter 2 Printed/Typed Name		Signature		Month Day Year		
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number						
	Facility's Phone:						
	18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. <b>H110</b>		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name <b>LEONARD IS FRY</b>		Signature <i>Leonard Is Fry</i>		Month Day Year <b>11 14 19</b>			

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>IND 005 462 601</b>		2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(219) 399-2492</b>		4. Manifest Tracking Number <b>020192013 JJK</b>			
5. Generator's Name and Mailing Address <b>ARCELORMITTAL USA LLC 3001 DICKEY ROAD EAST CHICAGO, IN 46312</b>					Generator's Site Address (if different than mailing address)					
Generator's Phone: <b>(219) 399-3189</b>										
6. Transporter 1 Company Name <b>ENVIRITE OF ILLINOIS, INC.</b>					U.S. EPA ID Number <b>ILD 000 666 206</b>					
7. Transporter 2 Company Name					U.S. EPA ID Number					
8. Designated Facility Name and Site Address <b>ENVIRITE OF ILLINOIS, INC.-USE 16435 S. CENTER AVE. HARVEY, IL 60426</b>					U.S. EPA ID Number <b>ILD 000 666 206</b>					
Facility's Phone: <b>(708) 596-7040</b>										
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
	X	RQ, NA3077, Hazardous waste, solid, n.o.s., (Chromium), 9, PGIII, (F006), ERG #171			No. Type <b>1 DT</b>		<b>15</b>	<b>T</b>	<b>F006</b>	<b>D007</b>
	2.									
	3.									
	4.									
14. Special Handling Instructions and Additional Information <b>10331 / CENTRAL TREATMENT PLANT SLUDGE / Emergency Contact: Kevin Martin w/Nalco (219)242-9834</b>  <b>Trailer - 200</b>										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Offor's Printed/Typed Name <b>Carl Geib</b>					Signature <i>Carl Geib</i>		Month Day Year <b>11 21 19</b>			
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____									
	17. Transporter Acknowledgment of Receipt of Materials									
TRANSPORTER	Transporter 1 Printed/Typed Name <b>Adam Stonebraker</b>					Signature <i>Adam Stonebraker</i>		Month Day Year <b>11 21 19</b>		
	Transporter 2 Printed/Typed Name					Signature		Month Day Year		
DESIGNATED FACILITY	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
	18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number _____									
	Facility's Phone: _____									
	18c. Signature of Alternate Facility (or Generator) _____ Month Day Year _____									
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
1. <b>H110</b>		2.		3.		4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a										
Printed/Typed Name <b>Leonard C. Gray</b>					Signature <i>Leonard C. Gray</i>		Month Day Year <b>11 21 19</b>			